

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

ORIGINAL
JAN 3 10 51 AM '02
CHIEF CLERK'S OFFICE

Docket No.

02-0402

Nexus Communications, Inc.

Application for a certificate of local and
Interexchange authority to operate as a
reseller and facilities based carrier of
telecommunications services in the
service territories of SBC Ameritech in
the State of Illinois

**APPLICATION FOR CERTIFICATE TO BECOME A
TELECOMMUNICATIONS CARRIER**
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name(including d/b/a, if any)

FEIN #

Nexus Commnications. Inc.

31-1735438

Address: Street 7830 North Central Drive, Suite C

City Lewis Center, OH State/Zip 43035

2. Authority Requested: (Mark all that apply) _____ 13-403 Facilities Based
Interexchange

☒ 13-404 Resale of Local and/or

Interexchange

☒ 13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange
service authority under Sections 13-404 or 13-405, waivers of Part 710 and
of Section 735.180 of Part 735 are generally requested. In applications
for interexchange service authority under Sections 13-403 and 13-404,
waivers of Part 710 and Part 735 are generally requested. Please indicate
which waivers Applicant is requesting and explain why Applicant is
requesting each waiver/variance.

X Part 710 Uniform System of Accounts for Telecommunications Carriers

 X Part 735 Procedures Governing the Establishment of
Credit, Billing, Deposits, Termination of Service and Issuance of
Telephone Directories for Local Exchange Telecommunications
Carriers in the State of Illinois

 X Section 735.180 Directories

 Other

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:

- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
 - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
 - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
 - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.
- Appendix A, B, C & D are all attached.

5. In what area of the state does the Applicant propose to provide service?

Applicant intends to provide service within the service territories of SBC Ameritech. Applicant adopts the maps and territorial descriptions on file with the Commission for SBC Ameritech.

6. Please attach a sheet designating contact persons to work with Staff on the following:

- a) issues related to processing this application
- b) consumer issues
- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

Please see attached Exhibit A

7. Please check type of organization?

 Individual X Corporation
 Partnership Date corporation was formed

9-11-2000

In what state? Ohio

 Other (Specify)

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

Please see attached Exhibit B

9. List jurisdictions in which Applicant is offering service(s).

Applicant is currently offering service only in the state of Ohio.

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

_____ YES (Please provide details) ☒ _____ NO

11. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

_____ YES ☒ _____ NO

If YES, describe fully.

12. Has Applicant provided service under any other name?

☒ _____ YES _____ NO

If YES, please list.

In the State of Ohio Applicant operates under the d/b/a TSI.

13. Will the Applicant keep its books and records in Illinois? ☒ _____ YES
☒ _____ NO

If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested. Permission is requested pursuant to 83 Ill. Adm Code part 250 for the ability to keep its books and records at corporate headquarters located in Lewis Center, OH.

MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

Please see attached Exhibit C

15. List officers of Applicant.

Steven Fenker
Vice President

Mazan Rabah
Secretary

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? _____ YES ☒ NO

If YES, list entity.

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

Applicant will bill each customer a statement 30 days in advance indicating the due date and the amount that is due. All payments for service are paid in advance and are due on the expiration of each subsequent thirty (30) day period. Each Customer's statement shall contain information associated with all applicable taxes and surcharges.

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

Applicant will handle all customer service issues customer complaints and billing from its corporate offices located in Columbus, Ohio. Applicant provides effective and efficient customer complaint resolution and each customer is notified of their right to escalate at any time to a customer care center team leader or manager. The customer is also informed of their respective right to contact the Illinois Commerce Commission if for any reason their respective situation has not been fully resolved to their satisfaction by the Applicant.

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? _____ YES ☒ NO

20. What telephone number(s) would a customer use to contact your company?

1-866-392-7123

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

☒ YES _____ NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers? Applicant requires a customer's express permission to change, add or delete any service or additional calling features.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 732, 735, 755, 756, 757, 770, and 772?

☒ YES ☐ NO (If no, please provide an explanation.)
However Applicant still requests waivers on Part 710, Part 735, Section 735.180 Directories
24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

☒ YES ☐ NO

FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service. Please see attached Exhibit D

TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities? ☐ YES
☒ NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

If NO, which facility provider(s)'s services does the Applicant intend to use?

Applicant intends to utilize the underlying network facilities of SBC Ameritech.

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

Applicant intends to offer Prepaid Local Service through both Resale and Unbundled Network Elements (UNE-P) and resold long distance service.

28. Will technical personnel be available at all times to assist customers with service problems?

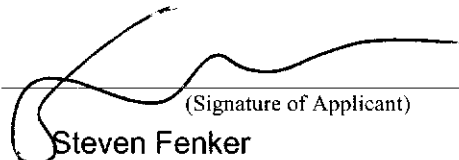
☒ YES ☐ NO

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls;

(e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? _____ YES

_____ NO

Applicant does not intend to offer payphone service.

A handwritten signature in black ink, appearing to read 'Steven Fenker', is written over a horizontal line. The signature is stylized with a large loop at the beginning and a wavy line extending to the right.

(Signature of Applicant)

Steven Fenker

Vice President

VERIFICATION

This application shall be verified under oath.

OATH

State of Ohio

) S S

County of Franklin

)

Steven Fenker makes oath and says that he is Vice President

of

Nexus Communications, Inc.

that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.

(Signature of affiant)

Subscribed and sworn to before me, a Notary Public/

(Title of person authorized to administer oaths)

in the State and County above named, this 19 day of MAY 2002

(Signature of person authorized to administer oath)

